MODULE 6. INMATE MOVEMENT

NOTE: This Module reviews considerations for inmate movement only. For guidance on inmates exposed to COVID-19, refer to the <u>BOP Pandemic Plan</u>, Module 4. Inmate Isolation & Quarantine

WHAT'S NEW

- All quarantine has decreased from 14 days to 10 days.
- Exposure quarantine of 10 days is routinely required for all inmates regardless of vaccination status.
- POC and PCR testing may be used interchangeably for quarantine and movement purposes based on how quickly the test result is needed and the supply available at each of the institutions.
- Movement procedures for holdover and detention centers have been updated.
- Temperature checks will no longer be required for BOP to BOP transfer or transfer to other
 correctional jurisdictions. Temperature checks will continue to be required for inmates at Intake and
 prior to any movement where the inmate will be exposed to the general public (e.g. prior to court
 appearances, outside hospital/clinic appointments, full term/immediate releases).
- Inmates in "holdover" status may be going to court on a daily, weekly, monthly basis or unpredictable frequency; they should be housed separately from inmates who have completed a 10 day test-in/test-out quarantine.
- Inmates in "holdover" status, who are expected to remain at the institution for prolonged period of time, will need to complete a 10 day test-in/test-out quarantine prior to being released to general population.
- Situations in which an inmate becomes symptomatic or tests positive for COVID-19 just prior to immediate release or completion of their sentence will be referred to the Regional Medical Director for guidance on plans for release.

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A. DEFINITIONS

FULLY VACCINATED: Having completed a vaccination series: 2 weeks after their second dose in a 2-dose series (Pfizer or Moderna), or 2 weeks after a single-dose vaccine (Janssen) as authorized by the U.S. Food and Drug Administration. Proper documentation, including the name of the vaccine and dose administration dates from an official / reliable source, is required for a person to be considered fully vaccinated.

MEDICAL ISOLATION: Confining individuals with suspected (displaying symptoms) or confirmed (based on a positive POC or commercial laboratory test) COVID-19 infection, either to single rooms or by COHORTING them with other similarly infected patients.

 Refer to Module 4 for additional guidance on COVID-19 pandemic-related QUARANTINE and MEDICAL ISOLATION.

MINIMAL TOLERABLE RISK: The principle of choosing the option that presents the lowest possible risk when ideal conditions cannot be upheld.

NEW INTAKES: Includes new commitments, voluntary surrenders, writ returns, and any inmate brought to a BOP facility by the U.S. Marshals Service including the Justice Prisoner and Alien Transportation System, U.S. Customs and Border Protection, or Immigration and Customs Enforcement. Inmates returning from day trips (e.g., hospital or court returns) *are not* new intakes.

NOT FULLY VACCINATED: No documentation of vaccination, partial vaccination (one out of two doses), or less than 14 days have passed following completion of the vaccine series as authorized by the U.S. Food and Drug Administration.

Non-BOP Location (or Non-BOP Institution): Any institution outside of the 121 recognized BOP facilities; this includes all contract facilities.

POC TEST: A SARS-CoV-2 rapid point of care viral test (e.g., Abbott ID NOW™ COVID-19 PCR test, Abbott BinaxNOW™ COVID-19 Ag card, or Quidel Quickvue COVID-19 Ag test).

UP-To-Date VACCINATION STATUS: Proper documentation of having completed a vaccination series, and having received a booster according to current recommendations.

QUARANTINE: In the context of COVID-19, refers to separating (in an individual room or cohorting in a unit) asymptomatic, not fully vaccinated persons to (1) observe them for symptoms and signs of the illness during the INCUBATION PERIOD and (2) keep them apart from other incarcerated individuals.

- The BOP utilizes THREE CATEGORIES OF QUARANTINE exposure, intake, and transfer.
- The need to quarantine during inmate movement is affected by vaccination status, type of inmate movement, the inmate's destination and point of origin, and the operational level of the sending institution.

SS: COVID-19 symptom screen.

TC: COVID-19 temperature check.

B. PLANNING FOR INMATE MOVEMENT

Advanced and coordinated planning is required when transferring inmates to other BOP locations or other correctional jurisdictions, or when releasing inmates from BOP custody. Collaboration and coordination among departments, institutions, and regions is necessary to reduce the risk of SARS-CoV-2 exposure and transmission during inmate movement. Planning for inmate movement should be coordinated from the beginning with local Executive Staff, Case Management Coordinators (CMC), Unit Team, and Health Services staff—from all the institutions involved—in setting transfer dates and ensuring that all aspects of the transfer process are carried out efficiently. Coordination with other agencies (e.g., U.S. Marshals Service, Immigration and Customs Enforcement), as well as local or state health authorities, may also be necessary.

- Whenever possible, inmate move planning should occur enough in advance to accomplish the
 quarantine, testing and/or screening procedures appropriate to the specific type of inmate
 movement either a Transfer Quarantine (Section H) or a BOP Intrasystem Transfer (Section G).
 - A TRANSFER QUARANTINE may require approximately 10 to 21 days of advanced planning and a BOP INTRASYSTEM TRANSFER requires up to 72 hours.
- PPE appropriate for each setting (testing, transportation, etc.) should be worn by staff in accordance with established procedures. (See MODULE 2.)

C. GENERAL TRANSPORTATION CONSIDERATIONS

Movement of inmates can be a simple, short-distance transfer—or a complex, multi-day, multiinstitution process. The risk of SARS-CoV-2 exposure and transmission increases as the complexity of the move increases.

Normal transport routes and schedules need to be reviewed and reconsidered during a pandemic, taking into consideration the current epidemiological context (e.g., infection and transmission rates). Inmate movement should be coordinated in a manner that considers the following:

- Even a BOP intrasystem transfer direct from one BOP facility to another is not without some degree of risk due to the characteristics and communicability of SARS-CoV-2.
- MOVEMENT VARIABLES that increase the risk of SARS-CoV-2 exposure and transmission should be avoided whenever possible, including: multiple stops, introduction of multiple staff, and mixing together of inmates from other BOP facilities or other correctional jurisdictions.

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- Minimize the amount of time inmates are held in HOLDOVER; the longer an inmate spends in transit, the greater the risk for exposure to the virus. The frequency of certain drop offs or pick-ups may need to be increased to minimize holdovers.
- To minimize risk of exposure and transmission, avoid mixing the following inmate groups at the institution and during movement as much as possible:
 - Inmates are considered to be at lower risk for exposure and transmission if they are 1) coming from a BOP facility regardless of vaccination status and have completed the recommended transfer procedures, or 2) fully vaccinated regardless of point of origin, or 3) not fully vaccinated from a non-BOP location after completing an intake quarantine. Although fully vaccinated inmates

- have a lower risk of infection and transmission, breakthrough infections and transmission are occurring. Movement-based viral testing, and on occasion, quarantine may be indicated.
- Inmates considered to be at higher risk for exposure and transmission are those who are not fully vaccinated and coming from a non-BOP location who have not completed an intake quarantine.
- An inmate who is currently in or meets the criteria for COVID-19 medical isolation (a current positive SARS-CoV-2 test or who has fever or symptoms of COVID-19) should NOT be transferred or released from BOP custody unless absolutely necessary (e.g., immediate release, completion of a sentence) and with coordination of appropriate medical precautions and care. During critical housing limitations, transfer of infected inmates may be necessary to assure the safety and wellness of staff and inmates.
- An inmate who is currently in or meets the criteria for placement in quarantine should **NOT** be transferred or released from BOP custody unless absolutely necessary (e.g., immediate release, court order, completion of a sentence).

D. DOCUMENTATION

- It can be useful to maintain a COVID-19-related roster of inmates to facilitate management of
 release/transfer. Helpful data points include cell assignment, start date of quarantine, projected end
 date of quarantine, date of placement in that cell, cell mate or members of a cohort, testing dates,
 type of test (POC or commercial), test results and designated facility.
- The BEMR Exit Summary/transfer paperwork should be provided to the bus LT/USMS to verify that
 required screening and testing have been completed.
- Documentation on the BEMR exit summary/transfer paperwork (e.g., In-Transit Form) needs to include:
 - For TRANSFER QUARANTINE document the start and end dates of quarantine, SARS-CoV-2 test type, dates and results for both admission and discharge tests, and results of the symptom screen within 24 hours of transfer.
 - For BOP INTRASYSTEM TRANSFERS document the SARS-CoV-2 test type, date and result within 72 hours of a BOP intrasystem transfer and results of the symptom screen within 24 hours of transfer.
 - For inmates who have a history of COVID-19 illness and are recovered and ready to transfer: Exit summary and clinical notes should include the inmate's most recent COVID-19 history (e.g., date of symptom onset, date of initial positive SARS-CoV-2 test, date and criteria used for release from isolation, and any complications or sequelae from the illness).
 - VACCINATION STATUS to include the manufacturer and date(s) of COVID-19 vaccine (if vaccinated) should be noted on all exit summaries.

E. STRATEGIES TO LIMIT SARS-COV-2 TRANSMISSION DURING INMATE MOVEMENT

The BOP uses multiple strategies for limiting transmission of SARS-CoV-2 during inmate movement, depending on the type of movement and the epidemiology of SARS-CoV-2 at the institution. Procedures for movement are designed to address the risk for transmission in a variety of situations including new inmates arriving at a facility, outgoing inmates from a facility to different destinations, detainees and holdovers, as well as different origination sources of inmates (within the BOP and external to the BOP).

The two primary movement procedures utilize either a 10-day test-in/test-out quarantine or a combination of a POC test with symptom screen prior to departure as described below in more detail with each movement type.

- NOT FULLY VACCINATED INMATES are always quarantined as a new intake to the BOP, when arriving at
 their designated facility, and when transferring or releasing to a community location (e.g., home
 confinement, residential reentry center, or community release). A COVID-19 BOP intrasystem
 transfer procedure may be performed instead of a transfer quarantine when transferring from an
 institution at operational level 1 to another BOP facility or correctional jurisdiction or when they are
 in holdover status en route to another BOP facility.
- FULLY-VACCINATED INMATES ordinarily do not need to be quarantined as new intakes, prior to transfer
 to another BOP facility or correctional jurisdiction, or when transferring or releasing to a community
 location (e.g., home confinement, residential reentry center, or community release). There may be
 other situations in which it is appropriate to quarantine fully vaccinated inmates, especially in the
 context of active transmission and exposures during movement. The decision to quarantine a fullyvaccinated inmate is recommended in consultation with Regional Health Services staff.
- Refer to the <u>Appendices</u> at the end of this Module for a table and algorithms describing movement of fully vaccinated and not fully vaccinated inmates and movement procedures at detention centers, holdover sites, and the Federal Transfer Center.

F. INTAKE PROCEDURES

PRIOR TO ENTERING THE INSTITUTION, OR IN R&D: All new intakes to an institution, including voluntary surrenders, BOP intrasystem transfers, or transfers from outside the BOP system, will be screened by medical staff for SARS-CoV-2—including a COVID-19 symptom screen, a temperature check, and an approved viral test (either a POC or a commercial lab PCR test) performed on a sample obtained from a nasopharyngeal, mid-turbinate, or anterior nares swab.

- Inmates who arrive symptomatic AND/OR test positive will be placed in MEDICAL ISOLATION regardless
 of COVID-19 vaccination status.
- Not fully vaccinated inmates who arrive asymptomatic AND test negative will be placed in INTAKE QUARANTINE.
 - If inmates become symptomatic during quarantine, they should be re-tested (POC or commercial test) and placed in MEDICAL ISOLATION immediately.
 - ➤ If inmates remain asymptomatic, they stay in QUARANTINE for at least 10 days. They are then tested out of quarantine with a POC test or commercial PCR test at 10 days or later. If the test is negative, the inmate can be released to the general population. If the test is positive, they should be placed in MEDICAL ISOLATION immediately.
- Fully vaccinated inmates will be screened by medical staff for SARS-CoV-2—including a COVID-19 SSTC and an approved viral test for SARS-CoV-2 as new intakes, but do not routinely require intake quarantine
- → Refer to Section I for Holdover Sites, Bus hubs and Detention Centers movement procedures
- Refer to Section J for OKL movement procedures.
- → Refer to MODULES 3 AND 4 for additional information regarding screening, testing, and medical isolation and quarantine of inmates.

G. BOP Intrasystem Transfers (Inmate Movement From one BOP Facility to Another BOP Facility) or Transfer to Another Correctional Jurisdiction

When inmates move from one BOP facility to another BOP facility, procedures are dependent on inmate vaccination status and institution operational level. Institutions should refer to the <u>COVID-19 Modified</u> <u>Operations Matrix</u> and the <u>appendices</u> at the end of this document for transfer procedures of fully vaccinated and not fully vaccinated inmates.

Fully vaccinated inmates

Fully vaccinated inmates ordinarily do not need to be quarantined prior to BOP intrasystem transfer or transfer to another correctional jurisdiction.

- Operational Level 1 at sending institution: SS within 24 hours prior to transfer
- Operational Level 2 or 3 at sending institution: POC test within 72 hours and a SS within 24 hours prior to transfer.
- Refer to Section I for Holdover Sites, Bus hubs and Detention Centers movement procedures
- Refer to Section J for OKL movement procedures.

Not fully vaccinated inmates:

- Operational Level 1 at sending institution: POC test within 72 hours and a SS within 24 hours prior to transfer.
- Operational Level 2 or 3 at sending institution: Transfer Quarantine
- DO NOT TRANSFER ANY inmate who have been exposed to COVID-19; instead, place in EXPOSURE QUARANTINE.
- Inmates with a history of COVID-19 diagnosed within the past 90 days do not need a SARS-CoV-2 test
 or quarantine prior to transfer.
- Do NOT TRANSFER inmates who are symptomatic and/or test positive; instead, place in MEDICAL ISOLATION.
- INTAKE QUARANTINE is performed on all not fully vaccinated BOP intrasystem transfers when they
 arrive at their designated facility (refer to Section H).
- A symptom screen, temperature check, and a viral test is performed on all inmates when they arrive
 at their designated facility.
- → For this procedure to be effective, institutions will ensure that other aspects of the BOP COVID-19 Pandemic Plan are implemented, including but not limited to broad-based inmate testing strategies, exposure quarantine, and medical isolation.
- → Refer to MODULES 3 AND 4 for additional information regarding screening, testing, and medical isolation and quarantine of inmates.

H. TRANSFER QUARANTINE PROCEDURES

- Whenever possible, 10 to 21 days of advance planning is recommended to allow sufficient time to complete the Transfer Quarantine.
- A TRANSFER QUARANTINE will be used for 1) not fully vaccinated inmates transferring out of the BOP to
 community locations (e.g., full term release, residential reentry center, or home confinement); or 2)
 not fully vaccinated inmates transferring to another BOP facility or to other correctional jurisdictions,
 dependent on COVID-19 operational level of the sending institution.
- A TRANSFER QUARANTINE is not routinely required for fully vaccinated inmates moving to other BOP facilities, correctional jurisdictions, or community locations (e.g., full term release, residential reentry center, or home confinement).
- An inmate who is currently in COVID-19 quarantine or medical isolation, should NOT be transferred unless absolutely necessary (e.g. court order, immediate release).
- Situations in which an inmate becomes symptomatic or tests positive for COVID-19 just prior to immediate release, or completion of their sentence will be referred to the Regional Medical Director for guidance on plans for release.
- → Refer to MODULES 3 AND 4 for additional information regarding screening, testing, and medical isolation and exposure quarantine of inmates.

All inmates meeting criteria for TRANSFER QUARANTINE will be managed in one of the following three categories, which are discussed below:

- 1. Inmates with no prior history of COVID-19 who are not fully vaccinated.
- Inmates previously diagnosed with COVID-19 who have since recovered and have met the current criteria for release from medical isolation (see MODULE 4).
- 3. Immediate releases.
- Consultation with the Regional Medical Director, Regional Health Services Administrator, and Regional Infection Prevention Consultant is recommended for management of inmates who are not in one of these three categories.

1. TRANSFER OR RELEASE OF INMATES WITH NO PRIOR HISTORY OF COVID-19 WHO ARE NOT FULLY VACCINATED

- Prior to transfer, these inmates will undergo a POC or commercial lab PCR test and enter TRANSFER
 QUARANTINE. These inmates should be housed separately from inmates in EXPOSURE OR INTAKE
 QUARANTINE. See MODULES 3 AND 4 for testing procedures and more information on exposure
 quarantine and medical isolation.
- Inmates will remain in quarantine for a minimum of 10 days. They may be tested out of quarantine on day 10 with a POC test or commercial PCR lab test
 - If any inmate in a transfer quarantine cohort tests positive, the quarantine period must be restarted for all inmates in that cohort.
- Movement is preferred within five days of receiving the negative SARS-CoV-2 test result, regardless
 of the mode of travel (by ground or air). When this five-day window for movement cannot be
 achieved, the time frame for movement may be expanded to within 14 days of receiving the negative
 SARS-CoV-2 test result, as long as quarantine conditions are maintained for the entire time.

- A symptom screen and temperature check need to be performed within 24 hours prior to departure from the facility, if transferring to an RRC, home confinement, or for a full term or immediate release. For all other BOP to BOP transfers, or BOP to other correction jurisdiction transfers, only a symptom screening needs to be performed within 24 hours prior to departure.
- Documentation of the symptom screen, temperature, and entry and exit date test results must be included in the exit summary/transfer paperwork. (See <u>Documentation</u> above.)
- Inmate movement that needs to occur more than 14 days after receipt of a negative test result should be discussed with regional health services staff.

2. TRANSFER OR RELEASE OF INMATES WITH A HISTORY OF COVID-19 INFECTION

- WITHIN 90 DAYS OF INITIAL SYMPTOM-ONSET OR POSITIVE TEST: Inmates with a history of SARS-CoV-2
 infection within the last 90 days who have met criteria for release from medical isolation do not need
 to be placed in TRANSFER QUARANTINE and should not be tested.
- MORE THAN 90 DAYS SINCE INITIAL SYMPTOM-ONSET OR POSITIVE TEST: Inmates who have met criteria for
 release from medical isolation and are more than 90 days from their initial symptom onset or initial
 positive SARS-CoV-2 test are managed as inmates who have not had COVID-19 (see #1 above).
- INMATES NOT CLEARED FROM MEDICAL ISOLATION: Inmates with COVID-19 currently in medical isolation should not be released or transferred unless absolutely necessary (e.g., immediate release, completion of sentence). Special precautions and coordination with the Regional Medical Director are necessary for such cases, including use of appropriate PPE, source control, and notification of appropriate civilian health authorities or the receiving correctional jurisdictions.
- For the above scenarios, institutions will complete the <u>Documentation</u> requirements outlined above. Notification should be made to the receiving facility, jurisdiction, or local health authorities of the transfer.

3. IMMEDIATE RELEASES

The following actions should be taken when an inmate being released cannot be managed as described above under #1 or #2 because of statutory or judicial requirements.

- A symptom screen, temperature check, and rapid POC test should be performed on the day of departure and documented in the electronic health record, exit summary, and/or transfer paperwork. (See <u>Documentation</u> above.)
- The local health authorities in the receiving locality should be notified, and the travel arrangements coordinated with them, if necessary (e.g., if quarantine or isolation conditions are required during transportation or upon their arrival).
- The inmate should wear a face covering when departing the facility and while en route to their destination.
- Due to the ongoing changes to guidelines for home confinement, readers are referred to the most recent guidance from Reentry Services Division regarding transfer to home confinement.

I. HOLDOVER SITES, BUS HUBS AND DETENTION CENTERS

This guidance is based on an analysis of exposure risk for the inmate's point of origin (coming from a BOP facility or a non-BOP location) and the inmate's vaccination status (fully vaccinated vs. not fully vaccinated).

- Inmates designated to holdover sites, bus hubs and detention centers are managed using the procedures described in Section F. Intake Procedures.
- Inmates are considered to be at lower risk for exposure and transmission if they are 1) coming from a
 BOP facility regardless of vaccination status and have completed the recommended transfer
 procedure, or 2) fully vaccinated regardless of point of origin, or 3) not fully vaccinated from a nonBOP location after completing an intake quarantine. Although fully vaccinated inmates have a lower
 risk of infection and transmission, breakthrough infections and transmission are occurring.
 Movement-based viral testing, and on occasion, quarantine may be indicated.
- Inmates considered to be at higher risk for exposure and transmission are those who are not fully vaccinated and coming from a non-BOP location who have not completed an intake quarantine.
- To minimize risk of exposure and transmission, keeping the above two groups separated at the institution and during movement is recommended to the extent possible.
- HOLDOVER AREAS: Holdover sites and bus hubs should designate specific holdover areas for cohorting
 of inmates in advance, in numbers commensurate with anticipated levels and frequency of
 incoming inmates. Smaller cohorts may be housed together within these holdover areas (e.g., 10
 inmates in five 2-person cells) and moved to recreation, food services, showers, etc. without
 mixing with other cohorts.
- ON ARRIVAL TO THE HOLDOVER SITE, all inmates being placed in holdover status will have a symptom screen and temperature check.
 - Not fully vaccinated inmates coming from a non-BOP location will be placed in INTAKE QUARANTINE, if they are expected to change from "holdover status" (i.e., designated to the holdover institution or released into the general population).
- Characteristics of each institution (e.g. types and amount of available housing) and the amount of infection occurring at the facility or during the movement require some flexibility in how new detainees, pre-trial, pre-sentence, and holdover inmates are managed. Critical staffing shortages, and housing limitations might affect how cohorts are separated. Institutions, in consultation with Regional Health Services, should be making decisions to uphold the MINIMAL TOLERABLE RISK standard. Refer to Section M for infection control guidance for transportation of Holdover site, Bus Hub or Detention Center inmates.
- → Refer to the <u>Appendices</u> at the end of this Module for Holdover and Detention Center Movement Procedures Algorithm

HOLDOVERS FROM BOP INSTITUTIONS, FULLY-VACCINATED INMATES FROM NON-BOP LOCATIONS, INMATES WHO HAVE COMPLETED AN INTAKE QUARANTINE.

Inmates from BOP facilities who are fully vaccinated, have completed an intake quarantine at the holdover site, or fully vaccinated inmates from non-BOP facilities ordinarily do NOT need to complete a TRANSFER QUARANTINE prior to moving on to their next destination. Quarantine may be

appropriate for fully vaccinated inmates in the context of active viral transmission during inmate movement. Such decisions should be made in consultation with Regional Health Services staff.

- OVERNIGHT REBOARDS (< 24 HOURS): POC tests, symptom screen and temperature check are NOT required for movement.
- INMATES IN HOLDOVER STATUS 24 TO < 72 HOURS: perform a symptom screen within 24 hours of transfer.
 POC testing is not required.
- INMATES IN HOLDOVER STATUS 72 HOURS OR MORE: perform a POC test within 72 hours and a SS within 24 hours of transfer.
- PROLONGED HOLDOVERS BEING CONSIDERED FOR GENERAL POPULATION HOUSING: Not fully vaccinated inmates
 who are expected to be housed at a holdover site, bus hub, or detention center for a prolonged
 period of time (> 10 days) may complete an INTAKE QUARANTINE and be moved to the general
 population, when appropriate and in accordance with established institution procedures upon
 meeting criteria for release from intake quarantine.
 - After relocation to the general population and, prior to transferring to another BOP facility, inmates should undergo the transfer procedure appropriate for their vaccination status, type of transfer and operational level.
- Different procedures are utilized by OKL for management of BOP intrasystem transfers (refer to Section J).
- On arrival to their designated facility, all not fully vaccinated inmates must complete an INTAKE QUARANTINE.

HOLDOVERS FOR NOT FULLY-VACCINATED INMATES FROM NON-BOP INSTITUTIONS

Holdover inmates from non-BOP facilities, and who are not fully vaccinated will undergo the following procedures:

- Undergo symptom screening, temperature check, and POC test on arrival to the institution
- Complete a seven day stay minimum at the institution
- Undergo POC/PCR testing within 48 hours of expected departure, and symptom screen within 24 hours of departure.
- Holdover inmates who stay at the institution beyond the 7-day minimum, may transfer at anytime by undergoing a POC/PCR test within 72 hours of departure, and a symptom screen within 24 hours of departure.
- Not fully vaccinated inmates from a non-BOP institutions should NOT be mixed with other holdover groups.
- If a NOT FULLY VACCINATED INMATE FROM A NON-BOP INSTITUTION completes a 10-day test-in/test-out
 INTAKE QUARANTINE at the holdover site or detention facility, they are eligible to release to general
 population or transfer using the BOP holdover or intrasystem transfer procedure, as applicable.
- On arrival to their designated facility, all not fully vaccinated inmates must complete the INTAKE QUARANTINE.

MIXED GROUPS

If a holdover site, bus hub, or detention center receives a **mixed group of not fully vaccinated** inmates from both BOP and non-BOP institutions, they must ALL be managed as a **NOT FULLY VACCINATED INMATES**FROM A NON-BOP LOCATION at the holdover site—with SSTC and POC testing on arrival, seven day stay minimum at the institution, and POC/PCR test out within 48 hours of transfer and SS within 24 hours of departure as described above.

J. FEDERAL TRANSFER CENTER, OKLAHOMA CITY (FTC)

This guidance is based on an analysis of exposure risk for the inmate's point of origin (coming from a BOP facility or a non-BOP location) and the inmate's vaccination status (fully vaccinated vs not fully vaccinated).

- Inmates are considered to be at lower risk for exposure and transmission if they are 1) coming from a
 BOP facility, regardless of vaccination status, and have completed the recommended transfer
 procedure, or 2) fully vaccinated regardless of point of origin, or 3) not fully vaccinated from a nonBOP location after completing an intake quarantine. Although fully vaccinated inmates have a lower
 risk of infection and transmission, breakthrough infections and transmission are occurring.
 Movement-based viral testing, and on occasion, quarantine may be indicated.
- Inmates considered to be at higher risk for exposure and transmission are those who are not fully vaccinated and coming from a non-BOP location who have not completed an intake quarantine.
- To minimize risk of exposure and transmission, keeping the above groups separated at the institution and during movement is recommended to the extent possible.
 - Refer to the <u>Appendices</u> at the end of this document for the OKL Federal Transfer Center Movement Procedures Algorithm
 - Refer to Section M for infection control guidance for transportation of FTC inmates.
- BOP inmates are symptom screened, temperature checked, and POC tested on arrival. Once cleared
 (i.e., all findings are negative), they are placed in "move-ready" units organized into smaller cohorts
 within the housing units and do not mix with other cohorts.
- Inmates arriving from non-BOP locations who are fully vaccinated are symptom screened, temperature checked, and POC tested. If all findings are negative, they may be housed in "moveready" units. When deemed necessary and appropriate, the FTC may also house these holdovers with the not fully vaccinated inmates from non-BOP locations described below.
- Inmates arriving from non-BOP locations who are not fully vaccinated are transported from various non-BOP correctional facilities to the FTC. They are housed separate from the "move-ready" groups and organized into smaller cohorts within the housing units. Ideally, they do not mix with other cohorts in the same housing unit.
 - Holdover inmates who have completed a 104-day quarantine at the FTC or have become fully vaccinated while at the FTC may be moved to "move-ready" units.
- On a case-by-case basis in consultation with Regional Health Services staff, alternative housing strategies may be utilized to adapt to the changing demands of inmate movement.
- Inmates who arrive designated to the FTC will follow procedures in <u>Section F</u>.

INTAKE PROCEDURES FOR HOLDOVERS ARRIVING FROM NON-BOP LOCATIONS

- All inmate holdovers arriving from non-BOP locations are symptom screened, temperature checked and POC tested upon arrival.
- Fully vaccinated inmates who screen and test negative may be housed in a "move-ready" unit or in a "non-BOP" unit depending on housing capacity and the level of COVID-19 transmission.
- Not fully vaccinated inmates who screen and test negative are housed in a "non-BOP" unit. These
 holdovers may be moved to "move-ready" units if they become fully vaccinated while at OKL or have
 completed an INTAKE QUARANTINE.
- All inmate holdovers arriving from non-BOP locations who are not fully vaccinated will be kept at OKL for a minimum of 7 days.
- Unvaccinated inmates will be offered vaccination with the COVID-19 vaccine.

OUTGOING MOVEMENT PROCEDURES

- BOP inmates or inmates who are fully vaccinated will be symptom screened within 24 hours prior to departure.
- Inmates who arrived from non-BOP locations, are not fully vaccinated, and have not completed an
 INTAKE QUARANTINE will have a POC viral test within 48 hours prior to departure (as close to the time
 of departure as is feasible) and symptom screening within 24 hours prior to departure.

K. MEDICAL TRANSFERS TO MRCS

The same strategies to limit SARS-CoV-2 transmission for non-medical transfers are applied to medical transfers to MRCs and Care level 3 facilities.

- Fully vaccinated inmates should follow the intrasystem transfer procedures at the sending
 institution as appropriate for their vaccination status and the institution operational level.
- Not fully vaccinated inmates should undergo the transfer procedure appropriate for their type of transfer, vaccination status, and the operational level of the institution. When TRANSFER QUARANTINE is required for a transfer to an MRC, the following procedures are recommended for emergency and routine urgent designations.

Emergency Designations

Upon receipt of an emergency designation approval by the Office of Medical Designations and Transport (OMDT) at the sending facility, the inmate must complete the transfer procedure appropriate for their vaccination status and the operational level of the institution.

IF TEST-IN IS POSITIVE: The patient should be placed in MEDICAL ISOLATION. The sending institution and
the receiving MRC should discuss the specifics of the case and determine the most appropriate
course of action regarding transfer, including acuity of the patient's medical condition and
appropriateness of transfer in light of the patient's COVID-19 status. However, there may be rare
instances where the nature and acuity of the patient's medical condition necessitates a more
expeditious transfer. These cases should be discussed among the sending institution, the receiving
MRC, and the Chief of Health Programs.

 If TEST-IN IS NEGATIVE: The patient will complete the TRANSFER QUARANTINE as specified above under <u>Transfer or Release of Inmates with No Prior History of COVID-19</u>. See also <u>Other Considerations for Medical Transfers</u> below.

Routine Urgent Designations

Since ROUTINE URGENT designations may take a longer period from the date of designation approval to the actual transfer date, designated patients may generally await transfer in their current housing unit.

 When the date of transfer has been provided by the MRC, the patient should undergo the transfer procedure appropriate for their type of transfer, vaccination status and the operational level at the institution.

Other Considerations for Medical Transfers

- HOSPITALIZED PATIENTS AND THOSE IN LTC: There are times when the patient awaiting transfer is being
 managed at an outside hospital or long-term care facility (LTC), so that quarantine within the BOP
 institution prior to transfer is not possible. In these circumstances, the patient may be transferred
 without a TRANSFER QUARANTINE. If the patient is actively infected with COVID-19, proper PPE will be
 needed during transfer.
- SPECIALIZED NEEDS: In some instances, due to the medical condition and/or needs of the patient,
 placement in transfer quarantine may pose a challenge (e.g., need for assistance with ADLs, wound
 care). Unique solutions may need to be developed to appropriately accommodate the patient's
 needs. Considerations may include: temporary placement at an LTC facility, housing patient in
 quarantine with other transfer quarantine group inmate(s) that may assist with minor needs, or a
 designated inmate companion.
- In the case of a DESIGNATED INMATE COMPANION, the companion will need to test negative immediately prior to the TRANSFER QUARANTINE period (if indicated, dependent on vaccination status) with either a POC or a commercial lab test. The companion will house with the patient for the duration of the transfer quarantine period until the patient transfers. Since the companion is not expected to be transferred, they will not need to undergo the symptom screening process or a SARS-CoV-2 test at the end of the transfer quarantine period to return to general population.
 - However, if the patient whom the companion is assisting or housing with becomes symptomatic or tests positive, the companion is considered a CLOSE CONTACT and must test-in/test-out of an EXPOSURE QUARANTINE.

L. MEDICAL APPOINTMENTS & HOSPITAL TRIPS

An important area of consideration is the risk of exposure to COVID-19, as well as other concerns, posed by medical trips to the community. Institutions with high facility or community transmission rates, and/or low vaccination acceptance levels (Operational Level 2 and 3 operations), should consider postponing or rescheduling non-urgent consultations or procedures according to guidance in MODULE 7.

NON-COVID-19 ROUTINE MEDICAL & DENTAL SERVICES.

- Regardless of vaccination status, all patients should undergo SSTC and POC testing prior to scheduled appointments
- If time allows, a SSTC and POC testing should be completed immediately prior to emergency trips while awaiting the arrival of EMS staff.

- When medical appointments and/or hospitalizations are medically necessary despite the risk of exposure to COVID-19, SSTC and POC testing should fall into the following categories (Refer to <u>Appendix A. Inmate Movement Table</u>)
 - Patient is FULLY VACCINATED and has a medical appointment or trip to the emergency room but returns to the institution in less than 24-hours: the patient will undergo standard intake procedures upon return to the institution.
 - Patient is FULLY VACCINATED and returns to the institution after 24 hours: the patient should undergo SSTC and POC testing upon arrival in addition to following usual standard intake procedures.
 - Patient is NOT FULLY VACCINATED and has an appointment or trip to the emergency room but returns to the institution in less than 24-hours: the patient will undergo SSTC in addition to following usual standard procedures upon return to the institution. Patient should be offered the COVID-19 vaccine.
 - Patient is NOT FULLY VACCINATED and returns to the institution after 24 hours: the patient should undergo SSTC and a full test-in/test-out 10-day quarantine. Patient should be offered the COVID-19 vaccine.

M. IN-PERSON COURT APPEARANCES

Court appearances are important aspects of the U.S. criminal justice system but create potential risks for SARS-CoV-2 transmission from close interactions that may occur. A number of variables affect the risk of COVID-19 transmission during in-person court appearances and will determine some of the specific management strategies that are needed at each location.

- The U.S. Marshals Service (USMS) takes responsibility for the inmate from the time they leave the BOP institution until their return. Each USMS district may have their own procedures. Individual courts may also have different COVID-19 prevention/mitigation procedures and requirements. The risk or likelihood of mixing with non-quarantined, non-BOP inmates while BOP inmates are with the USMS and the courts is essential to determining their risk of COVID-19 exposure.
- The frequency of an inmate's court appearances and the number of inmates going to a court at any
 one time are also important factors to consider.
- It is recommended that each BOP detention center contact the USMS and the court to ascertain
 their COVID-19 mitigation procedures and consult with Regional Health Services staff on developing
 an individualized strategy. The following are general principles to follow:
 - BOP officials will request that BOP inmates be cohorted only with their own housing or quarantine cohort and not be mixed or transported with inmates from other housing units or institutions. Regardless of vaccination status, SSTC is required within 24 hours prior to each court appearance.
- A POC test is also required within 72 hours prior to each court appearance for fully vaccinated inmates at operational level 2 or 3 institutions and for all not fully vaccinated inmates.
- Upon return to the detention center, inmates without known exposure to SARS-CoV-2 do not require immediate testing or quarantine; however, follow-up SSTC and POC testing once a week for two weeks after the most recent court appearance is indicated.
- Inmates in "holdover" status may be going to court on a daily, weekly, monthly basis or unpredictable frequency; they should be housed separately from inmates who have completed a 10 day test-in/test-out quarantine.

- Inmates in "holdover" status, who are expected to remain at the institution for prolonged period of time, will need to complete a 10 day test-in/test-out quarantine prior to being released to general population.
- Do not mix not fully vaccinated inmates with General Population inmates.
- An Intake Quarantine is required prior to a not fully vaccinated inmate being released to General Population.
- Testing an inmate immediately after a one-day court appearance would have little utility and is not recommended. However, an Abbott ID NOW test can be used before a court appearance on a caseby-case basis, especially if the test is required by the court.
- Inmates in COVID MEDICAL ISOLATION OR EXPOSURE QUARANTINE should not have in-person court
 appearances unless absolutely necessary. Having the inmate appear via telephone hearing should be
 strongly considered. A video teleconference (VTC), if accessible, can also be used as an alternative.
- Inmates should wear face coverings (surgical mask preferred) and perform hand hygiene just before departure and upon return to the institution.

M. INFECTION CONTROL GUIDANCE FOR TRANSPORTATION OF INMATES

→ See MODULE 2 for more details on the use of PPE. See MODULE 1 for more information about hand hygiene, social distancing, and cleaning and disinfection.

The following PPE is required for inmates who are fully vaccinated or have completed a TRANSFER QUARANTINE:

INMATES: Face coverings

STAFF: Face coverings and gloves

The following PPE is required for movement of not fully vaccinated BOP or non-BOP groups who have not completed a Transfer Quarantine but have been POC tested and symptom screened (i.e. a BOP INTRASYSTEM TRANSFER PROCEDURE).

- > INMATES: Surgical mask
- STAFF: Surgical mask, face shield or goggles, and gloves

The below guidance should be implemented for the safe transportation of the following groups:

- Inmates with signs and symptoms of respiratory illness or a positive SARS-CoV-2 test where movement is necessary prior to clearance from medical isolation.
- Not fully vaccinated groups of inmates, where infection has not been ruled out (i.e. has not completed Intake Quarantine, Transfer Quarantine or BOP Intrasystem Transfer Procedure)

VEHICLE SET-UP PRIOR TO TRANSPORT

- > Place vehicle indoor fan on FRESH AIR ONLY, and NOT re-circulation mode.
- > Set fan to HIGH.
- Driver side-window should be rolled down to the lowest position possible
- Rear and side windows on both sides of the vehicle should be propped opened (weather permitting).
- When the vehicle being used is a bus: Open the hatch on the ceiling of the vehicle.

INMATE ACTIVITY PRIOR TO BOARDING THE VEHICLE:

- The inmate is given a direct order to:
 - Place surgical mask on their face and then,
 - Perform hand hygiene by washing hands or sanitizing with an institution-approved hand sanitize solution

PPE FOR DRIVER AND OFFICER

- All staff must wear an N95 or equivalent
- When performing any action within close proximity to the inmate (e.g., putting on or removing restraints), eye protection, gloves, and gown, along with N95 or its equivalent, must be worn.
 - Once the inmate is placed into the vehicle, gloves and gown should be removed outside of the vehicle and discarded into a trash bag and hand hygiene performed.
 - Officer in contact with inmate(s) puts on new gown and gloves before helping inmates disembark from vehicle.

INMATES BOARDING THE VEHICLE

Fill bus starting from the back to maximize distance of the nearest inmate from the driver.

AFTER THE END OF TRANSPORT

- Introduce fresh air into the vehicle for one hour by opening all doors and windows on the vehicle
- While wearing all required PPE mentioned above, the vehicle should be cleaned and sanitized using the institution's approved hospital grade disinfectant (EPA Schedule N)

INFECTION CONTROL GUIDANCE FOR TRANSPORTATION OF FTC, HOLDOVER AND DETENTION CENTER INMATES

This guidance is based on an analysis of exposure risk for the inmate's point of origin (coming from a BOP facility or a non-BOP location) and the inmate's vaccination status (fully vaccinated vs not fully vaccinated).

- Inmates are considered to be at lower risk for exposure and transmission if they are 1) coming from a BOP facility regardless of vaccination status, or 2) fully vaccinated regardless of point of origin, or 3) not fully vaccinated from a non-BOP location after completing an intake quarantine. Although fully vaccinated inmates have a lower risk of infection and transmission, breakthrough infections and transmission are occurring. Movement-based viral testing, and on rare occasion, quarantine may be indicated.
- Inmates considered to be at higher risk for exposure and transmission are those who are not fully vaccinated and coming from a non-BOP location who have not completed an intake quarantine.
- To minimize risk of exposure and transmission, keeping the above two groups separated at the institution and during movement is recommended to the extent possible.
- While being processed for outgoing movement, the two groups will be kept separate to the extent
 possible. Any instances in which BOP and fully vaccinated inmates are in close proximity to non-BOP
 not fully vaccinated inmates should be minimal based on the limitations of holding cells in the R&D
 area and the specialized needs of the inmates (e.g., max custody, designated to FLM ADX, SMU,
 residential units).

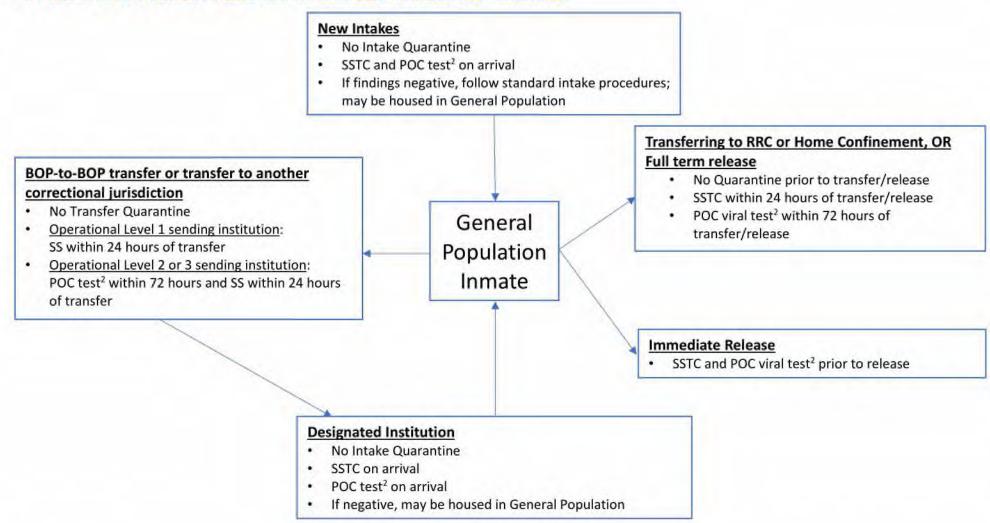
- Inmates moving from the FTC will be issued surgical masks without metal nose pieces (donned in R&D) to wear underneath a cloth face cover (double masking) and worn until their intake at the gaining facility, at which time they would resume wearing their cloth face cover.
- Outgoing flights and buses may include BOP and fully vaccinated inmates and non-BOP not fully
 vaccinated inmates as required by the movement. To the extent possible, these groups will be kept
 separate or physically distanced from each other. Inmates will board the JPATS flight or bus by group,
 with the non-BOP not fully vaccinated inmate section of the bus toward the rear part of the bus. Each
 group will be seated in separate sections of the plane or bus and each section will be separated by
 enough empty rows to account for 6 feet.
- The following PPE is required for movement of inmates who are not fully vaccinated and have not completed a TRANSFER QUARANTINE but have been POC tested and symptom screened.
 - o INMATES: Surgical masks
 - STAFF: Surgical mask, face shield or goggles, and gloves

APPENDIX A. INMATE MOVEMENT TABLE

Movement Type	Fully Vaccinated	Not Fully Vaccinated
Intake from non-BOP facility	 SSTC and POC testing at intake No intake quarantine If screening and testing are negative, follow standard intake / R&D procedures; may be housed in General Population. 	 Complete intake quarantine (10-day test- in/test-out) Offer COVID-19 vaccine
BOP to BOP Transfer or Transfer to Other Correctional Jurisdiction - Sending Institution	 Standard R&D procedures Transferring from Level 1 Institution: SS within 24 hours of transfer Transferring from Level 2 or 3 Institution: POC test within 72 hours and SS within 24 hours of transfer No transfer quarantine Send vaccination documentation as appropriate 	 Transferring from Level 1 Institution: POC test within 72 hours of transfer, and SS within 24 hours of transfer Transferring from Level 2 or 3 Institution: Transfer quarantine (10-day testin/test-out) Offer COVID-19 vaccine
BOP to BOP Transfer – Receiving Institution	 SSTC and POC test at intake No intake quarantine If screening and testing are negative, follow standard intake / R&D procedures; may be housed in General Population. 	 Complete intake quarantine (10-day test-in/test-out) Offer COVID-19 vaccine
Transfers to home confinement or halfway houses (RRCs) – Sending Institution	 Standard R&D procedures No quarantine required prior to transfer SSTC within 24 hours of transfer POC test within 72 hours of transfer Send vaccination documentation as appropriate 	 Complete transfer quarantine (10-day test in/test-out quarantine) Offer COVID-19 vaccine
Full Term Release	 Standard R&D procedures No quarantine required prior to release SSTC within 24 hours of release POC test within 72 hours of release Send vaccination documentation as appropriate 	 Complete transfer quarantine (10-day test- in/test-out quarantine) Offer COVID-19 vaccine
		as appropriate

Movement Type	Fully Vaccinated	Not Fully Vaccinated
Federal Transfer Center (FTC / OKL) The FTC houses inmates based on their point of origin (BOP vs. non-BOP institution) and on their vaccination status. When transferring out: Only a SS is required for inmates in a "moveready" unit. For those in a "non-BOP" unit, a POC test is required within 48 hours and a SS within 24 hours prior to departure. Inmates from "move-ready" and "non-BOP" housing units may travel "together but separated" (i.e., they may travel on the same bus or plane but are seated in different areas with each group separated from the other by six feet)	The state of the s	From a BOP institution SSTC and POC test on arrival House in "move-ready" unit From a non-BOP institution SSTC and POC test on arrival House in "non-BOP" unit a minimum of 7 days
	→ Refer to <u>Section J</u> and <u>Appendix E</u> for OKL moven	nent procedures.
Medical Appointments & Hospital Trips	 Prior to appointment: SSTC and POC test Returns after same day/ less than 24-hour trips Follow usual return procedures Returns after trips > 24 hours SSTC and POC test in addition to following usual return procedures 	 Prior to appointment: SSTC and POC test Returns after same day/ less than 24-hour trip SSTC in addition to following usual return procedures Returns after trips > 24 hours Quarantine (10 day test in/test out) Offer COVID-19 vaccine
→ CDC Guidance states the following in relation to court appearances: Test incarcerated/detained persons leaving the facility as close to the day of visit as possible (no more than 3 days prior). → Each court may have additional or different procedural requirements.	Level 1 Institution:	 SSTC within 24 hours and POC testing within 72 hours prior to each court appearance Inmates must complete Intake Quarantine prior to being released to General Population. Follow-up SSTC and POC testing once a week for two weeks after the most recent court appearance. Offer COVID-19 vaccine

APPENDIX B. MOVEMENT ALGORITHM FOR FULLY VACCINATED INMATES



SS: Symptom screen; TC: Temperature check

¹ Fully Vaccinated means a person 2 weeks after either their second dose in a 2-dose series (Pfizer or Moderna) or after a single dose series (Janssen). To be managed as a Fully Vaccinated inmate, new intakes must have documentation of vaccine series completion.

² Inmates with a positive COVID-19 test in the last 90 days (who completed their medical isolation) do not need a viral test.

APPENDIX C. MOVEMENT ALGORITHM FOR NOT FULLY VACCINATED INMATES

New Intakes

- SSTC and POC viral test (or commercial lab PCR) on arrival
- Complete 10-day Intake Quarantine with PCR/POC test out on day 10 and SS within 24 hours of discharge;

General

Population

Inmate

- If all findings negative, may be released to General Population
- Offer COVID-19 vaccine

BOP-to-BOP transfer or transfer to another correctional jurisdiction Level 1 sending institution

- Level 1 sending institution
- POC viral test² 72 hours prior to transfer
- · SS within 24 hours of transfer
- · 10-day transfer quarantine is NOT required

Level 2 or 3 sending institution²

- Can only transfer after completing 10-day Transfer Quarantine
 - SS on entry quarantine
 - · POC/PCR test-in and test-out on day 10
 - SS within 24 hours of transfer
 - If all findings negative, inmate may transfer

<u>Transferring to RRC or Home Confinement OR Full-term release</u>

- Can only transfer/release after completing 10-day Transfer Quarantine²
 - · SS on entry to quarantine
 - POC/PCR test-in and test-out on day 10
 - SSTC within 24 hours of transfer/release
 - · If all findings negative, may transfer or release

Immediate Release

SSTC and POC viral test² prior to release

Designated Institution

- Must complete 10-day Intake Quarantine
 - SSTC on arrival
 - POC/ PCR test-in and test-out on day 10
 - · SS within 24 hours of release from quarantine
 - If all findings negative, may release to General Population
 - Offer COVID-19 vaccine

SS: Symptom screen; TC: Temperature check

¹ Fully Vaccinated means a person 2 weeks after either their second dose in a 2-dose series (Pfizer or Moderna) or after a single dose series (Janssen). To be managed as a Fully Vaccinated inmate, new intakes must have documentation of vaccine series completion.

² Inmates with a positive COVID-19 test in the last 90 days (who completed their medical isolation) do not need a transfer guarantine or viral test prior to transfer,

APPENDIX D. HOLDOVER AND DETENTION CENTER PROCEDURES

Not fully vaccinated holdover inmates from non-BOP² facilities Inmates arriving from BOP Institutions (regardless of SSTC and POC testing on arrival vaccination status) and inmates arriving from non-BOP2 (these two groups do Seven day stay minimum at the institution locations who are fully vaccinated not mix at the POC/PCR test-out w/in 48 hours of departure SSTC and POC testing on arrival (all inmates) institution) If all negative, may transfer out of institution after SS w/in 24 hours of departure Offer COVID-19 Vaccine These Holdover inmates who stay beyond the 7-day minimum, may transfer after: SS within 24 hours of departure POC test within 72 hours of departure If leaving ≥ 72 hrs If expected to change from "holdover status" If leaving in less If leaving 24-72 hrs SS within 24 hrs SS within 24 hrs of (designated to institution or released to General than 24 hrs of transfer transfer No SS Population): POC viral test No POC testing No POC testing Intake Quarantine if not fully vaccinated* within 72 hours SS on entry to quarantine/arrival prior to transfer POC/PCR test-in and test-out on day 10 SS within 24 hours of release from guarantine

SS: Symptom screen; TC: Temperature check

¹ Fully Vaccinated means a person 2 weeks after either their second dose in a 2-dose series (Pfizer or Moderna) or after a single dose series (Janssen). To be managed as a Fully Vaccinated inmate, new intakes must have documentation of vaccine series completion.

² Non-BOP location or institution applies to any institution outside of the 122 recognized BOP facilities; this includes all contract facilities.

APPENDIX E. OKL - FEDERAL TRANSFER CENTER MOVEMENT PROCEDURES

Holdover inmates arriving from a BOP Institution (regardless of vaccination status) or who are arriving from a non-BOP location² and are fully vaccinated¹

- · SSTC and POC testing on arrival
- Placed in "move-ready"

· SS within 24 hours of departure

ON ARRIVAL

(these two groups do not mix at the institution)

Not fully vaccinated holdover inmates from non-BOP² facilities

- · SSTC and POC testing on arrival
- Placed in "non-BOP" housing and kept at OKL a minimum of 7 days
- Offer COVID-19 Vaccine
- If the inmate completes a 10-day quarantine at the FTC or becomes fully vaccinated while at the FTC, they may be moved to "move-ready" units.

UPON DEPARTURE

- SS within 24 hours of departure
- · POC test within 48 hours of departure

Together BUT SEPARATED Outgoing Bus/JPATS FLIGHT Procedures

- To the extent possible, these two groups will not mix in R&D or "waiting areas"
- All inmates will be provided surgical masks without metal nose piece to be donned in R&D and worn under a cloth mask
- Not fully vaccinated holdover inmates from non-BOP facilities will board the bus/airplane first towards the rear (preferred)
- The BOP and fully-vaccinated inmate group will board the bus/airplane last, and towards the front allowing empty seat rows to achieve >6 ft of distance between the groups.

Upon Arrival to designated institution:

- SSTC and POC testing on arrival
- 10-day Intake Quarantine if not fully vaccinated
 - · POC/PCR test-out on day 10
 - . SS within 24 hours of release from guarantine
 - · If all findings negative, may release to General Population
- Offer COVID-19 Vaccine

Inmates who arrive as designated to OKL:

- SSTC and POC viral test on arrival
- 10-day Intake Quarantine if not fully vaccinated
 - · POC/PCR test-out on day 10
 - SS within 24 hours of release from quarantine
 - · If all findings negative, may release to General Population
- Offer COVID-19 Vaccine

SS: Symptom screen; TC: Temperature check

¹ Fully Vaccinated means a person 2 weeks after either their second dose in a 2-dose series (Pfizer or Moderna) or after a single dose series (Janssen). To be managed as a Fully Vaccinated inmate, new intakes must have documentation of vaccine series completion.

² Non-BOP location or institution applies to any institution outside of the 122 recognized BOP facilities; this includes all contract facilities.